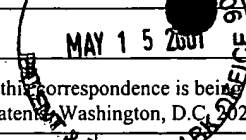


3734

		<b>CERTIFICATE OF MAILING</b>	
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231.			
Typed or Printed Name <i>Steven F. Goldstein</i>		Date <i>May 11, 2001</i>	
Signature <i>Steven F. Goldstein</i>			

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Attorney Docket	DURE-021	<b>RECEIVED</b> MAY 17 2001 TECHNOLOGY CENTER R3700
	First Named Inventor	Arenberg, et al.	
	Application Number	09/205,251	
	Filing Date	December 4, 1998	
	Group Art Unit	3734	
	Examiner Name	unassigned	
	Title	Controlled Release System for Delivering Therapeutic Agents into the Inner Ear	

ENCLOSURES (check all that apply)			
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Issue Fee Transmittal <i>(with copy of PTOL-85B)</i>	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Fee Attached		<input type="checkbox"/> After Allowance Communication to Group	
<input checked="" type="checkbox"/> Amendment/Response to Requirement for Election of Species and Preliminary Amendment	<input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences	
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>	
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Petition Routing Slip and Accompanying Petition	<input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>	
<input checked="" type="checkbox"/> Information Disclosure Statement, 1449 and 1 cited reference	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Proprietary Information	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Power of Attorney	<input type="checkbox"/> Status Letter	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Revocation	<input checked="" type="checkbox"/> Additional Enclosure(s) <i>(please identify below):</i>	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Associate	<u>1) Return Postcard</u>	
	<input type="checkbox"/> Change of Correspondence Address	<u>2) Amendment Transmittal</u>	
	<input type="checkbox"/> Terminal Disclaimer		
	<input type="checkbox"/> Small Entity Statement		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Individual Name	Carol L. Francis	Registration No.	36,513
Firm Name	BOZICEVIC, FIELD & FRANCIS LLP		
Signature	<i>Carol L. Francis</i>		
Date	<i>May 11, 2001</i>		

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b> Applicant(s): Arenberg, et al.				Docket No. <b>DURE021</b>	
Serial No. <b>09/205,251</b>	Filing Date <b>December 4, 1998</b>	Examiner <b>P. Bianco</b>	Group Art Unit <b>3762</b>		
Invention: <b>Controlled release System for Delivering Therapeutic Agents into the Inner Ear</b>					
<b><u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u></b>  Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	12 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0 x	\$80.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

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MAY 17 2001

TECHNOLOGY CENTER R3700

☒ No additional fee is required for amendment.  
☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \_\_\_\_\_  
 A duplicate copy of this sheet is enclosed.  
☐ A check in the amount of \_\_\_\_\_ to cover the filing fee is enclosed.  
☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. **50-0815**  
 A duplicate copy of this sheet is enclosed.  
☒ Any additional filing fees required under 37 C.F.R. 1.16.  
☒ Any patent application processing fees under 37 CFR 1.17.

\_\_\_\_\_  
 Signature

Dated: *May 11, 2001*

**Carol L. Francis**  
 Reg. No. 36,513  
 Bozicevic Field & Francis LLP  
 200 Middlefield Road, Suite 200  
 Menlo Park, California 94025

I certify that this document and fee is being deposited on May 11, 2001 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

\_\_\_\_\_  
 Signature of Person Mailing Correspondence

**Steven F. Goldstein**  
 \_\_\_\_\_  
 Typed or Printed Name of Person Mailing Correspondence